

[FR Doc. 2010-27412 Filed 10-28-10; 8:45 am]

BILLING CODE 4150-05-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**NIAID Blue Ribbon Panel Meeting on Adjuvant Discovery and Development**

Notice is hereby given that the National Institute of Allergy and Infectious Diseases (NIAID), a component of the National Institutes of Health (NIH) of the Department of Health and Human Services (DHHS), will convene a Blue Ribbon Panel to provide expertise in developing a strategic plan and research agenda for the discovery, development and clinical evaluation of adjuvants for use with preventive vaccines. NIAID has developed a draft Strategic Plan and Research Agenda for Adjuvant Discovery and Development, which summarizes the current status of research in the field of preventive vaccine adjuvants, identifies gaps in knowledge and capabilities, and defines NIAID's goals for the continued discovery, development and application of adjuvants for human vaccines that protect against infectious disease. The Panel will review the draft Strategic Plan and Research Agenda and recommend ways the NIAID can enhance its adjuvant research programs.

DATES: November 17–18, 2010.**ADDRESSES:** The meeting location is: Rockville—Hilton Hotel (Roosevelt Room), 1750 Rockville Pike, Rockville, MD 20850.**FOR FURTHER INFORMATION CONTACT:** Ms. Grace Tollini-Farrell, 301-496-7551.

Dated: October 21, 2010.

Daniel Rotrosen,*Director, Division of Allergy, Immunology and Transplantation, NIAID, National Institutes of Health.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Toxicology Program (NTP); Office of Liaison, Policy and Review; Meeting of the NTP Board of Scientific Counselors: Amended Notice****AGENCY:** National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health, HHS.**ACTION:** Extension of public comment period.

SUMMARY: The NTP announces an amended date for submission of written public comments for the November 30–December 1, 2010 meeting of the NTP Board of Scientific Counselors (BSC). Information regarding the BSC meeting was published on October 19, 2010, in the **Federal Register** (75 FR 201) and is available on the BSC meeting page (<http://ntp.niehs.nih.gov/go/165>). The guidelines and deadlines published in this **Federal Register** notice still apply, except that the deadline for submission of written comments is extended to November 16, 2010.

DATES: The BSC meeting will be held on November 30–December 1, 2010. The deadline for submission of written comments and for pre-registration to attend the meeting, including registering to present oral comments, is November 16, 2010.

ADDRESSES: The BSC meeting will be held in the Rodbell Auditorium, Rall Building at the NIEHS, 111 T.W. Alexander Drive, Research Triangle Park, NC 27709. Public comments on all agenda topics and any other correspondence should be submitted to Dr. Lori White, Designated Federal Officer for the BSC, NTP Office of Liaison, Policy and Review, NIEHS, P.O. Box 12233, K2-03, Research Triangle Park, NC 27709; telephone: 919-541-9834; fax: 919-541-0295; whiteltd@niehs.nih.gov. Courier address: NIEHS, 530 Davis Drive, Room K2136, Morrisville, NC 27560.

FOR FURTHER INFORMATION CONTACT: Dr. Lori D. White (telephone: 919-541-9834 or whiteltd@niehs.nih.gov).

Dated: October 21, 2010.

John R. Bucher,*Associate Director, National Toxicology Program.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare & Medicaid Services****[Document Identifier: CMS-10319]****Agency Information Collection Activities: Proposed Collection; Comment Request****AGENCY:** Centers for Medicare & Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS) is publishing the following summary of proposed

collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Pre-Existing Condition Insurance Plan Program Solicitation and Contractor's Proposal Package; *Use:* The Department of Health and Human Services (HHS) is requesting a renewal of this package by the Office of Management and Budget (OMB); specifically, HHS is now seeking a three-year approval for this collection. On March 23, 2010, the President signed into law H.R. 3590, the Patient Protection and Affordable Care Act (Affordable Care Act), Public Law 111-148. Section 1101 of the law establishes a "temporary high risk health insurance pool program" (which has been named the Pre-Existing Condition Insurance Plan, or PCIP) to provide health insurance coverage to currently uninsured individuals with pre-existing conditions. The law authorizes HHS to carry out the program directly or through contracts with States or private, non-profit entities.

This package renewal is requested as a result of a possible transition in administration of the program from a Federally-run to a State administered program. A State who originally decided to have HHS administer the program in their State may in the future notify HHS of their desire to administer the Pre-Existing Condition Plan (PCIP) program. PCIP is also referred to as the temporary qualified high risk insurance pool program, as it is called in the Affordable Care Act, but we have adopted the term PCIP to better describe the program and avoid confusion with the existing State high risk pool programs. *Form Number:* CMS-10319 (OMB#: 0938-1085); *Frequency:* Occasionally; *Affected Public:* State governments; *Number of Respondents:* 2; *Total Annual Responses:* 2; *Total Annual Hours:* 2,992. (For policy questions regarding this collection contact Laura Dash at 301-492-4296. For all other issues call 410-786-1326.)

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web site at <http://www.cms.hhs.gov/PaperworkReductionActof1995>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786-1326.

In commenting on the proposed information collections please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in one of the following ways by *December 28, 2010*:

1. *Electronically.* You may submit your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) accepting comments.

2. *By regular mail.* You may mail written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number, Room C4-26-05, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: October 26, 2010.

Martique Jones,

Director, Regulations Development Group, Division B, Office of Strategic Operations and Regulatory Affairs.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Cancer Trials Support Unit (CTSU) Public Use Forms and Customer Satisfaction Surveys (NCI)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register** on July 13, 2010 (75 FR 39950) and allowed 60-days for public comment. There have been no public comments. Additionally, the 30-day **Federal Register** was published on September 13, 2010. The purpose of this notice is to allow an additional 30 days for public comment to the revisions. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Cancer Trial Support Unit (CTSU). *Type of Information Collection Request:* Existing Collection in Use Without an OMB Number. *Need and Use of Information Collection:* CTSU collects annual surveys of customer satisfaction for clinical site staff using the CTSU Help Desk and the CTSU Web site. An ongoing user satisfaction survey is in place for the Oncology Patient

Enrollment Network (OPEN). User satisfaction surveys are compiled as part of the project quality assurance activities and used to direct improvements to processes and technology. In addition, the CTSU collects standardized forms to process site regulatory information, changes to membership, patient enrollment data, and routing information for case report forms. This questionnaire adheres to The Public Health Service Act, Section 413 (42 U.S.C. 285a-2) authorizes CTEP to establish and support programs to facilitate the participation of qualified investigators on CTEP-supported studies, and to institute programs that minimize redundancy among grant and contract holders, thereby reducing overall cost of maintaining a robust treatment trials program. Based on a conversation with the Office of Management and Budget on October 17, 2010, the burden table has been revised to take into account future submissions of a generic data transmittal forms (*see Attachment 1gg in the Table below*). It was agreed that the generic forms will be finalized and submitted in the future as non-substantive change requests for OMB clearance as needed. *Frequency of Response:* The help desk and Web site survey are collected annually. The OPEN survey is ongoing. The form submissions vary depending on the purpose of the form and the activity of the local site. *Affected Public:* CTSU's target audience is staff members at clinical sites and CTEP-supported programs. Respondent and burden estimates are listed in the Table below. The annualized burden is estimated to be 34,802 hours and the annualized cost to respondents is estimated to be \$946, 601. There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

Attach No.	Section/form or survey title	Use metrics/ month— # respond	Estimated time for site to complete (minutes)	Estimated burden (minutes/ hours)	Frequency of response	Total annual usage/annual burden hours
Regulatory/Roster						
1a	CTSU IRB/Regulatory Approval Transmittal Form.	9,000	2	0.03	12.00	3,600
1b	CTSU IRB Certification Form	8,500	10	0.17	12.00	17,000
1c	CTSU Acknowledgement Form	500	5	0.08	12.00	500
1d	Optional Form 1—Withdrawal from Protocol Participation Form.	50	5	0.08	12.00	50
Roster Forms						
1e	CTSU Roster Update Form	50	2-4	0.07	12.00	40
1f	CTSU Radiation Therapy Facilities Inventory Form.	20	30	0.50	12.00	120
Drug shipment						